

CITY OF SAN MARCOS
Commercial Solid Waste Haulers
Quarterly Report Form

Permit Holder Name _____ Permit No. _____

Month: _____, 200__

Total Number of Commercial Customer Accounts: _____

Monthly Commercial Gross Revenue Receipts \$ _____

Month: _____, 200__

Total Number of Commercial Customer Accounts: _____

Monthly Commercial Gross Revenue Receipts \$ _____

Month: _____, 200__

Total Number of Commercial Customer Accounts: _____

Monthly Commercial Gross Revenue Receipts \$ _____

Total quarterly commercial gross receipts \$ _____

Notes (optional):